STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC)	(XI) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION:	(X3) DATE SURVEY COMPLETED:
	395716	A. BLDG: 00 B. WING:	05/18/2023

NAME OF PROVIDER OR SUPPLIER:	STREET ADDRESS, CITY, STATE, ZIP CODE:
SMITH HEALTH CARE, LTD. STATE LICENSE NUMBER: 453102	453 SOUTH MAIN RD MOUNTAIN TOP, PA 18707

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE	(X5) COMPLETE DATE
F 0000	INITIAL COMMENT Based on a Medicare/Medicaid Recertification, State Licensure and Civil Rights Compliance Survey completed on May 18, 2023, it was determined that Smith Healthcare, Ltd was not in compliance with the following requirements of 42 CFR Part 483, Subpart B, Requirements for Long Term Care Facilities and the 28 PA Code, Commonwealth of Pennsylvania Long Term Care Licensure Regulations.	F 0000		
F 0638 SS=D		F 0638		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE: | (X6) DATE:

Any deficiency statement ending with an asterisk (*) denotes a deficiency which may be excused from correction providing it is determined that other safeguards provide sufficient protection to the patients. The findings stated above are disclosable whether or not a plan of correction is provided. The findings are disclosable within 14 days after such information is made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

This form is a printed electronic version of the CMS 2567L. It contains all the information found on the standard document in much the same form. This electronic form once printed and signed by the facility administrator and appropriately posted will satisfy the CMS requirement to post survey information found on the CMS 2567L.

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F 0638 SS=D	Continued from page 1 483.20(c) Qrtly Assessment at Least Every 3 Months §483.20(c) Quarterly Review Assessment A facility must assess a resident using the quarterly review instrument specified by the State and approved by CMS not less frequently than once every 3 months. This REQUIREMENT is not met as evidenced by:	F 0638	F 0638 1. Resident 32 (VA contract) 90 day MDS was completed on 03/06/2023. During survey MDS coordinator sent MDS and was accepted. 2. All VA contract residents were reviewed for required submission per RAI manual and all are in compliance. 3. MDS coordinator will be re-educated on VA requirement using Rugs system along with CMS requirements using Hipps. 4. All VA contracts will have monthly reviews to assure proper MDS submission per RAI regulations and submit to QA quarterly 5. Completion 06/30/2023	Completion Date: **06/30/2023** Status: **APPROVED** Date: **06/09/2023**

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F 0638 SS=D	Continued from page 2 Based on review of the Resident Assessment Instrument User's Manual and clinical records, and staff interviews, it was determined the facility failed to ensure timely completion of a quarterly Minimum Data Set Assessment of one out of 12 residents reviewed (Resident 32). Findings include: The Long-Term Care Facility Resident Assessment Instrument (RAI) User's Manual, which provides instructions and guidelines for completing required Minimum Data Set assessments (MDS-mandated assessments of a resident's abilities and care needs), dated October 2019, indicated that quarterly MDS assessments were to be completed not less frequently than once every 3 months (92 days) between comprehensive	F 0638		

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F 0638 SS=D	Continued from page 3 assessments. A Review of Resident 32's clinical record revealed the resident was admitted to the facility on December 7, 2022. An admission Minimum Data Set assessment was dated as completed December 12, 2022. At the time of the survey ending May 18, 2023, there was no documented evidence that the facility had conducted a quarterly MDS assessment of the resident at least every three months. An interview with the Register Nurse Assessment Coordinator (RNAC) on May 17, 2023 at 11:00 AM confirmed that no quarterly MDS assessment of Resident 32 had been conducted since the	F 0638		

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F 0638 SS=D	Continued from page 4 resident's admission. 28 Pa. Code 211.12(c) Nursing services 28 Pa. Code 211.5(f) Clinical records.	F 0638		
F 0801 SS=F		F 0801		

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F 0801 SS=F	Continued from page 5 483.60(a)(1)(2) Qualified Dietary Staff §483.60(a) Staffing The facility must employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, taking into consideration resident assessments, individual plans of care and the number, acuity and diagnoses of the facility's resident population in accordance with the facility assessment required at §483.70(e) This includes: §483.60(a)(1) A qualified dietitian or other clinically qualified nutrition professional either full-time, part-time, or on a consultant basis. A qualified dietitian or other clinically qualified nutrition professional is one who- (i) Holds a bachelor's or higher degree granted by a regionally accredited college or university in the United States (or an equivalent foreign degree) with completion of the academic requirements of a program in nutrition or dietetics accredited by an appropriate national accreditation organization recognized for this purpose. (ii) Has completed at least 900 hours of supervised dietetics practice under the supervision of a registered dietitian or nutrition professional. (iii) Is licensed or certified as a dietitian or nutrition professional by the State in which the services are performed. In a State that does not provide for licensure or certification, the individual will be deemed to have met this requirement if he or she is recognized as a "registered	F 0801	F0801 1. On 05/26/2023 the facility hired a full time director of food and nutrition, who graduated from LCCC in 2013 from the culinary program with an Associate Degree of Applied Science in Hotel\Restaurant management. She is currently enrolled in the University of Florida CDM program with completion set for December 2023. 2. The New Director was hired as above. 3. The consulting RD will have frequent visits to ensure all Dietary regulatory requirements are being met. The consult RD will also proctor CDM program. 4. The consulting RD will submit performance reports of FSD monthly to NHA and to QA quarterly. 5. Completion 06/30/2023	Completion Date: **06/30/2023** Status: **APPROVED** Date: **06/09/2023**

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F 0801 SS=F	Continued from page 6 dietitian" by the Commission on Dietetic Registration or its successor organization, or meets the requirements of paragraphs (a)(1)(i) and (ii) of this section. (iv) For dietitians hired or contracted with prior to November 28, 2016, meets these requirements no later than 5 years after November 28, 2016 or as required by state law. §483.60(a)(2) If a qualified dietitian or other clinically qualified nutrition professional is not employed full-time, the facility must designate a person to serve as the director of food and nutrition services. (i) The director of food and nutrition services must at a minimum meet one of the following qualifications- (A) A certified dietary manager; or (B) A certified food service manager; or (C) Has similar national certification for food service management and safety from a national certifying body; or D) Has an associate's or higher degree in food service management or in hospitality, if the course study includes food service or restaurant management, from an accredited institution of higher learning; or (E) Has 2 or more years of experience in the position of director of food and nutrition services in a nursing facility setting and has completed a course of study in food safety and management, by no later than October 1, 2023, that includes topics integral to managing dietary operations including, but not limited to, foodborne illness, sanitation procedures, and food purchasing/receiving; and (ii) In States that have established standards for food service managers or dietary managers, meets State	F 0801		

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F 0801 SS=F	Continued from page 7 requirements for food service managers or dietary managers, and (iii) Receives frequently scheduled consultations from a qualified dietitian or other clinically qualified nutrition professional. This REQUIREMENT is not met as evidenced by:	F 0801		

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F 0801 SS=F	Continued from page 8 Based on staff interview and a review of personnel files and employee credentials, it was determined that the facility failed to employ a full-time qualified dietary services supervisor in the absence of a full-time qualified dietitian. Findings include: Prior to beginning the initial tour of the food and nutrition services on May 16, 2023, at 8:30 AM the director of nursing (DON) stated that the facility did not currently have a full-time qualified dietary services supervisor in the absence of a full- time qualified dietitian. During initial tour of the food and nutrition services department on May 16, 2023, at 9:00 AM Employee 1 (cook/assistant food services supervisor) confirmed that she was acting as the current food services supervisor, although she did not currently possess the regulatory required qualifications. Employee 1 (cook/assistant food services supervisor) stated that her responsibilities	F 0801		

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F 0801 SS=F	Continued from page 9 included oversight of food preparation, service, and storage of food. Employee 1 stated that the qualified dietitian provided oversight, but was not employed full-time at the facility. Interview with the director of nursing (DON) on May 16, 2023 at 10:00 AM confirmed the facility has been without a full-time qualified dietary services supervisor in the absence of a full- time qualified dietitian since April 10, 2023. 28 Pa. Code 211.6(c) Dietary services. 28 Pa Code 201.18(e)(1)(6) Management.	F 0801		

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F 0812 SS=E	483.60(i)(1)(2) Food Procurement,Store/Prepare/Serve-Sanitary §483.60(i) Food safety requirements. The facility must - §483.60(i)(1) - Procure food from sources approved or considered satisfactory by federal, state or local authorities. (i) This may include food items obtained directly from local producers, subject to applicable State and local laws or regulations. (ii) This provision does not prohibit or prevent facilities from using produce grown in facility gardens, subject to compliance with applicable safe growing and food-handling practices. (iii) This provision does not preclude residents from consuming foods not procured by the facility. §483.60(i)(2) - Store, prepare, distribute and serve food in accordance with professional standards for food service safety. This REQUIREMENT is not met as evidenced by:	F 0812	F 0812 1. a. The facility immediately defrosted the upright reach in freezer. b. All frozen foods will be dated on day of delivery. c. All meat will be dated when frozen d. Wall in area of dishwasher was cleaned immediately 2. Same as above 3. The facility will review and revise all policies and procedures for the storage and service of food. Dietary and maintenance staff will be educated on proper dating of foods. Dietary staff will be re-educated on maintaining clean work areas in the kitchen. 4. The food service director will conduct random audits and submit to QA quarterly. 5. Completion 06/30/2023	Completion Date: **06/30/2023** Status: **APPROVED** Date: **06/09/2023**

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F 0812 SS=E	Continued from page 11 Based on observation and staff interview, it was determined that the facility failed to maintain acceptable practices for the storage and service of food to prevent the potential for contamination and microbial growth in food, which increased the risk of food-borne illness in the food and nutrition services department. Findings include: Food safety and inspection standards for safe food handling indicate that everything that comes in contact with food must be kept clean and food that is mishandled can lead to foodborne illness. Safe steps in food handling, cooking, and storage are essential in preventing foodborne illness. You cannot always see, smell, or taste harmful bacteria that may cause illness according to the USDA (The United States Department of Agriculture, also known as the Agriculture Department, is the U.S. federal executive department responsible for developing and executing federal laws related to food).	F 0812		

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F 0812 SS=E	Continued from page 12 Initial tour of the food and nutrition services department in the presence of Employee 1 (cook/assistant food services supervisor) on May 16, 2023, at 9:00 AM, revealed the following sanitation concerns with the potential to introduce contaminants into food and increase the potential for food-borne illness: Observation of the food storage room located on the ground floor (separate from the main kitchen area) revealed an upright reach-in freezer, which had a thick build-up of ice on the shelves of the freezer. There were four frozen 10-pound packages of ground beef in the freezer with a manufacturer best by date of May 14, 2023. There were three loaves of frozen bread and approximately 15 bags of frozen vegetables in the freezer which were not dated when placed into frozen storage. There were eight five-pound bags of grated cheese on the shelf in the reach-in refrigerator which were	F 0812		

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F 0812 SS=E	Continued from page 13 not dated. Observation of the food and nutrition services department on May 18, 2023 at 8:30 AM revealed the wall in the area of the dishwasher had a build-up of a black substance and was visibly soiled. Interview with Employee 1 (cook/assistant food services supervisor) on May 18, 2023 at 8:45 AM confirmed that acceptable practices for food storage were to be followed and all food storage areas were to be maintained in a sanitary manner. 28 Pa. Code 211.6 (c) Dietary services. 28 Pa. Code 207.2(a) Administrator's responsibility.	F 0812		

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F 0812 SS=E	Continued from page 14	F 0812		

Certified End Page

SMITH HEALTH CARE, LTD.

STATE LICENSE NUMBER: 453102

SURVEY EXIT DATE: 05/18/2023

I Certify This Document to be a True and Correct Statement of Deficiencies and Approved Facility Plan of Correction for the Above-Identified Facility Survey

Jeane Parisi
Deputy Secretary for Quality Assurance

Debra L. Bogen, MD, FAAP
Acting Secretary of Health

pennsylvania
DEPARTMENT OF HEALTH

THIS IS A CERTIFICATION PAGE

PLEASE DO NOT DETACH

THIS PAGE IS NOW PART OF THIS SURVEY